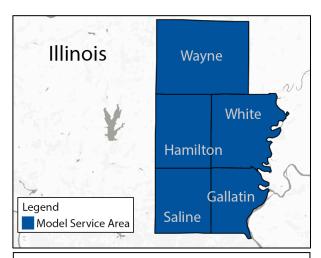
Egyptian Public & Mental Health Department Integrated Care for Kids (InCK) Model Illinois

Lead Organization: Egyptian Public & Mental Health Department (Egyptian Health Department) (Award Recipient)

Maximum Award Amount Over 7 Years: \$15,666,736

State Medicaid/CHIP Agency: Illinois Department of Healthcare and Family Services

Model Goals: Egyptian Health Department (EHD), an integrated local public health department and behavioral health agency, leads Village InCK. Village InCK aims to increase early identification services to 80 percent of the Medicaid population with focus on integrating behavioral and physical health care. In order to achieve this goal, EHD will use an integrated services team called "i-Hub" as a central access point for care coordination. Village InCK is also designed to reduce costs for emergency department visits, inpatient psychiatric care, and residential substance use disorder (SUD) services. EHD seeks to reduce expenditures through heightened education, mobile crisis response services, and increased engagement in SUD prevention, treatment, and recovery services, respectively. Village InCK will serve children and youth in



Model Service Area & Population

Target Population: ~7,900 Medicaid beneficiaries from birth to age 21 across five adjacent rural counties.

five contiguous rural counties that have higher rates of poverty than state and national averages.

Highlights: Key services for the target population includes mobile crisis response, wellness coaches (for those with medically complex or chronic health conditions), community health workers, medical telehealth specialty services, integrated case management with mobile crisis response, peer support, respite, in-home community support team services follow up, and a family support program.

Implementation Strategy: EHD uses routine physical and behavioral health assessments and screenings across the attributed population to support timely and appropriate referrals. Mobile assessment teams administer comprehensive needs assessments in homes, schools, and in the community. The i-Hub, which is comprised of a Resources Coordinator, Service Integration Coordinators, and the Partnership Council, reviews screening results and stratifies children into service integration levels according to individual need using a comprehensive needs assessment. The i-Hub provides children and youth and/or caregivers with information and referrals to core community services. HealthEC, a care management platform, supports children and youth, caregivers, and providers in coordinating care for individuals demonstrating higher levels of need.

Alternative Payment Model: Key components of the Village InCK APM model include a per-member-per-month (PMPM) payment, an incentive pool, and shared savings components. The PMPM payment is available for care coordination activities performed by providers within the HealthEC platform, with half of the PMPM payment being withheld to fund the incentive pool. Payments from the incentive pool are intended to cover additional integrated services and support specific value-added services, including shared plans of care and Healthcare Effectiveness Data and Information Set (HEDIS) measures (both reporting and performance measures).

Community Partners: Partnership Council members represent local core child services providers; Illinois Department of Healthcare and Family Services; Illinois Chapter of American Academy of Pediatrics; and the Office of Medicaid Innovation at the University of Illinois.

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